CHAMPVA POLICY MANUAL

CHAPTER: 2 SECTION: 5.7

TITLE: ORAL SURGERY

AUTHORITY: 38 USC 1713;38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(e)(10)

TRICARE POLICY MANUAL: Chapter 8, Section 1.4

I. EFFECTIVE DATE

October 8, 1986

II. PROCEDURE CODE(S)

HCPCS Level II Codes: D7260, D7285, D7286, D7410-7420, D7430-D7431, D7440-D7441, D7450-D7451, D7460-D7461, D7465, D7480, D7490, D7520, D7530, D7540, D7550, D7560, D7610, D7620, D7630, D7640, D7650, D7660, D7670, D7680, D7710, D7720, D7730, D7740, D7750, D7760, D7770, D7780, D7810, D7820, D7830, D7840, D7860, D7870, D7910, D7911, D7912, D7920, D7955, D7980, D7981, D7982, and D7983

III. DESCRIPTION

There are certain oral surgical procedures which are performed by both physicians and dentists, and which are essentially medical rather than dental care.

IV. POLICY

- A. The following procedures along with their corresponding American Dental Association (ADA) dental nomenclature codes are considered to be in this category and benefits may be extended for otherwise covered services and supplies without preauthorization. Oral surgery claims will be processed by the CHAMPVA Center.
- B. Excision of tumors and cysts of the jaws, cheeks, lips, tongue, roof and floor of the mouth, when such conditions require a pathological (histological) examination.
 - 1. D7285 Biopsy of oral tissue (hard).
 - 2. D7286 Biopsy of oral tissue (soft).
 - 3. D7410-D7420 Radical excision of reactive inflammatory lesion.

- 4. D7430-D7431 Excision of benign tumor.
- 5. D7440-D7441 Excision of malignant tumor.
- 6. D7450-D7451 Removal of odontogenic cyst or tumor.
- 7. D7460-D7461 Removal of non-odontogenic cyst or tumor.
- 8. D7465 Destruction of lesions by physical methods: electrosurgery, chemotherapy and cryotherapy.
 - C. Marsupialization of Ranula.
- D. Removal of midline palatal tori and lingual mandibular tori. This does not include alveolar ridge irregularities or multiple exostoses of the mandible and maxilla.
- E. Surgical procedures required to correct accidental injuries of the jaws, cheeks, lips, tongue, roof and floor of mouth.
 - 1. Treatment of fractures simple.
 - a. D7610 Maxilla open reduction, teeth immobilized (if present).
 - b. D7620 Maxilla closed reduction, teeth immobilized (if present).
 - c. D7630 Mandible open reduction, teeth immobilized (if present).
 - d. D7640 Mandible closed reduction, teeth immobilized (if present).
- e. D7670 Alveolus stabilization of teeth, open reduction splinting (when supported by radiographic evidence of fracture).
 - 2. Treatment of fractures compound.
 - a. D7710 Maxilla open reduction.
 - b. D7720 Maxilla closed reduction.
 - c. D7730 Mandible open reduction.
 - d. D7740 Mandible closed reduction.
- e. D7770 Alveolus stabilization of teeth open reduction splinting (when supported by radiographic evidence).
 - 3. Repair of traumatic wounds.
 - D7910 Suture of recent small wounds up to 5 cm.

- 4. Complicated suturing.
 - a. D7911 Complicated suturing, up to 5 cm.
 - b. D7912 Complicated suturing, over 5 cm.
- c. D7920 Skin grafts (identify defect covered, location and type of graft).
 - d. D7955 Repair of maxillofacial soft and hard tissue defect.
 - F. Treatment of oral and/or facial cancer.
 - G. Treatment of fractures of facial bones.
 - 1. D7650 Alar and/or zygomatic arch open reduction.
 - 2. D7660 Malar and/or zygomatic arch closed reduction.
- 3. D7680 Facial bones complicated reduction with fixation and multiple surgical approaches.
 - 4. D7750 Malar and/or zygomatic arch open reduction.
 - 5. D7760 Malar and/or zygomatic arch closed reduction.
- 6. D7780 Facial bones complicated reduction with fixation and multiple surgical approaches.
 - H. External (extraoral) incision and drainage of cellulitis.
 - 1. D7520 Incision and drainage of abscess-extraoral.
 - 2. D7540 Removal of reaction-producing foreign body.
 - I. Surgery of accessory sinuses, salivary glands or ducts.
 - 1. D7260 Oral antral fistula closure (and/or antral root recovery).
- 2. D7560 Maxillary sinusotomy for removal of tooth fragment or foreign body.
 - 3. D7980 Sialolithotomy.
 - 4. D7981 Excision of salivary gland.
 - 5. D7982 Sialodochoplasty.

- 6. D7983 Closure of salivary fistula.
- J. Reduction of dislocations and the excision of the temporomandibular joints, when surgery is a necessary part of the reduction.
 - 1. D7810 Open reduction of dislocation.
 - 2. D7820 Closed reduction of dislocation.
- K. Any oral surgical procedure which falls within the cosmetic, reconstructive and/or plastic surgery definition such as: (1) prognathism and micrognathism, (2) congenital craniofacial anomalies (i.e., Treacher-Collins syndrome, hemifacial microsomia, etc.).
- 1. The surgical correction of these severe deformities may be allowed as necessary medical treatment.
- 2. Medical documentation should describe a development skeletal deformity of the jaw with significant functional impairment, and should be backed with cephalometric and intraoral radiographs, study models and a statement of proposed need and treatment plan endorsed with physician and/or dentist support.
- 3. All such cases must be referred for professional evaluation and judgment.
- L. Other Medical Conditions. Medical conditions which may be treated either by a dentist or a physician, and which do not require preauthorization are addressed below.
 - 1. Osteomyelitis.
 - a. D7480 Partial ostectomy (guttering or saucerization).
 - b. D7490 Radical resection of mandible with bone graft.
 - D7550 Sequestrectomy for osteomyelitis.
- 2. Foreign Body. Removal of a foreign body which is hazardous to the patient's health, which is reaction-producing or complicates a primary medical condition.
- a. D7530 Removal of foreign body, skin or subcutaneous areolar tissue.
- b. D7540 Removal of reaction-producing foreign body musculoskeletal system.
- c. D7560 Maxillary sinusotomy for removal of foreign body (including tooth fragment).

- 3. Intrinsic and Traumatic Temporomandibular Joint Disease. Intrinsic and traumatic diseases of the temporomandibular joint which require surgery such as rheumatoid arthritis and osteoarthritis.
 - a. D7830 Manipulation under anesthesia.
 - b. D7840 Condylectomy.
 - c. D7860 Arthrotomy.
 - d. D7870 Arthrocentesis.

NOTE: Treatment of Temporomandibular Joint Syndrome, occlusal equilibration and restorative occlusal rehabilitation is excluded from this category.

V. POLICY CONSIDERATIONS

- A. Extraction of unerupted or partially erupted, malposed or impacted teeth, with or without the attached follicular or development tissues, are not covered oral surgery procedures except when the care is indicated in preparation for, or as a result of, dental trauma caused by the medically necessary treatment of an injury or illness. Surgical preparation of the mouth for dentures is not covered.
- B. The Therabite Jaw Motion System may be considered for cost-sharing as durable medical equipment (DME) when determined to be medically necessary and appropriate treatment, subject to all applicable program requirements (i.e., post-operative, re-education following injury or accident, or for care which is non-preventative). See also Chapter 2, Section 17.1, Durable Medical Equipment.

END OF POLICY